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AUTHOR Edens, Geraldine E.
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ABSTRACT

Professional socialization is the process by which individuals acquire the specialized knowledge, skills, attitudes, values, norms, and interests needed to perform their professional roles acceptably. The following interacting domains of potential professional self-growth can be defined as outcomes of the socialization process: self-image, role concept, attitudes, values, and personality. An examination of professional literature on the issue of professional socialization in nursing that was written between 1956 and 1985 revealed that there has been no unified framework in which to study socialization. The sociological model advocated in the 1960s has not been empirically supported in nursing. Although it is difficult to generalize results since most of the studies pertaining to nursing were limited to one or two schools, the evidence suggests that changes toward professional growth do occur in some domains as a result of the educational process. Of the 24 change studies reported in the literature, 21 were conducted in baccalaureate degree programs and 3 in diploma programs. None were conducted in associate degree programs. Thus, little is known about the effect of the educational environment in associate degree programs on the professional socialization of the nurses graduating from them. Despite the considerable changes in society, the nursing profession, and nursing education that have occurred in the last 10 years, most socialization research was done over 10 years ago. More research is also needed on the factors that contribute to the similarities and differences among the types of socialization outcomes resulting from different types of educational programs. (MN)

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Professional Socialization In Nursing

by

Geraldine E. Edens, R.N., Ph.D.

Associate Professor
University of Miami
School of Nursing

P.O. Box 248106
Coral Gables, FL 33124

(305) 547-5654

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Professional Socialization in Nursing

Professional socialization is a process by which individuals acquire the specialized knowledge, skills, attitudes, values, norms, and interests needed to perform their roles acceptably (Bragg, 1976). It is a process that integrates the cognitive and affective domains of professional performance that governs individual behavior. Professional socialization is a learning process that takes place in a social environment, of which the learner is an integral part. In a professional school, learning occurs through interaction with the educational setting, faculty, and other students. Each group generates characteristic kinds of experiences for the student and consequently creates a potential for change towards professional self-development.

Five interacting domains of potential professional self-growth, can be defined as outcomes of the socialization process. These are self-image, role concept, attitudes, values, and personality. The educational setting, faculty, and students are the major intervening variables that influence these outcomes. The nursing research in these areas is diverse. The purpose of this study was to summarize findings within this socialization framework (Figure 1.) in order to provide a unified perspective on the effect of professional nursing education and identify questions for future research.

Forty-two studies, published between 1955 and 1985, were included in this review. The studies appeared in Nursing Research (66.7%), other nursing journals (14.2%), and non-nursing

journals (19.1%). All studies were conducted within generic nursing programs and utilized a comparative, cross-sectional and/or longitudinal research design. The review was limited to published studies, although it was recognized that socialization has been a major topic in dissertation research. The study was organized to answer the following questions 1) Do changes occur as a result of the socialization process? 2) Does type of educational preparation influence socialization outcomes? and 3) What influence do faculty have on these outcomes? Studies that investigated more than socialization outcome were also examined to assess the interaction effects of the framework.

The student's acquisition of a professional self-image is a primary objective of nursing education. It implies an internalized identification with the goals and standards set forth by the profession, and thus, influences behavior in professional practice. Twelve studies investigated changes in students' self-images as they progressed through school, of which only four (Kuhn, 1960; Coe, 1965; Stein, 1969b: Till, 1980) suggested nursing education exerted a positive influence. Three of these studies were conducted in baccalaureate programs, and three were conducted before 1970. Olesen and Davis in (1966) suggested that the traditional model used to study socialization is not as simplistic as is implied and/or that nursing students are a unique group. Both points provide plausible explanations for the lack of significant findings in this body of research. The emerging role of women and changes in nursing "science" and

education over the last 15 years are intervening variables in the development of a student's self-image that have not been systematically investigated. Three studies that demonstrated a relationship between sex-role identity and professional self-image (Stromberg, 1976; Till, 198-; Meleis and Dragenais, 1981) provide the most recent evidence to support, in part, this hypothesis.

Type of nursing education appears to have some influence on the development of a professional self-image. The findings suggest baccalaureate programs are more successful than are diploma programs in achieving this goal (Richards, 1972; Stromberg, 1976; Meleis and Dragenais, 1981), but clear differences are not evident between baccalaureate and associate degree programs (Stromberg, 1976; Meleis and Dragenais, 1981). If self-image outcomes do not differ between these programs, then several questions that have not been empirically answered, are pertinent. What are the factors producing these similarities? Are they a function of curriculum design and/or teaching/learning processes? Should these outcomes differ in relation to differentiating two levels of entry into practice? and, if so, in what way?

Role conception is an image of the rights and obligations a person perceives to be associated with a position. Role conceptions provide expectations for performance which guide behavior and influence attitudes (Corwin and Taves, 1962). The research findings related to role conception in nursing are

consistent. Baccalaureate students have higher professional conceptions of their nursing role than do diploma and associate degree students, but they are less certain of these roles (Corwin, 1961; Corwin and Taves, 1962; Jones and Jones, 1977) and thus, are at greater risk for experiencing role conflict upon graduation. This phenomena has been extensively investigated and documented by Kramer (1970, 1974). The role conception findings are congruent with those on self-image. By definition, the two constructs interact, mutual complimenting one another (Davis, 1969). The research suggests that baccalaureate programs are successfully transmitting to students what the professional nursing role "should be" but are failing to assist them in integrating these images with their self-conceptions. The result is role uncertainty and conflict. In addition, there is evidence that other variables, such as personality attributes, influence role conceptions (Alutto and Hrebiniak, 1971; Kinney, 1985). There is a need to expand this body of research in order to identify other factors that contribute to the formation of nursing role conceptions held by students.

The attitude research is perhaps the most fragmented. There are a number of one-time studies that examine specific attitudes but there is no clear indication as to what professional nursing attitudes are, or should be. For example, studies categorized in this review under self-image and role conception are often cited as attitude studies, which suggests that the definition of these concepts is unclear and inconsistent in the literature. It is

known that student attitudes are subject to change and are significantly influenced by faculty. This is supported by a number of studies conducted in other fields (Merton et al., 1957; Becker and Carper, 1956; Schein, 1967), but as yet, not strongly substantiated within nursing. Two other deficiencies exist in the attitude research. First, there is no published research that compares attitudinal outcomes by type of program and second, the majority of attitude studies cited here were conducted before 1975, leaving 11 years of growth within the nursing profession unaccounted for.

There is evidence to suggest that the "typical" value pattern of nursing students has changed (Garvin and Boyle, 1985). This finding further supports the premise that the changing roles of women and evolvement of the nursing profession is influencing socialization outcomes. Value changes are evident as a result of the educational process (O'Neill, 1973; May and Illiardi, 1970; Bloomquist, Cruise, and Cruise, 1980) and do vary by type of educational program (Dutsun, 1964; Redman, 1966) and program affiliation (religious, private, public) (Bloomquist et al., 1980). The most significant finding from this body of research; however, is the lack of change evidenced in theoretical, intellectual, and logical values among baccalaureate students in both cross-sectional and comparative studies (Dutsun, 1964; Redman, 1966; Bloomquist et al., 1980). Given the emphasis in baccalaureate schools on theoretical content and intellectual skills, this finding is inconsistent with desired outcomes.

Factors contributing to these outcomes, however, have not been clearly isolated.

As with value patterns there is evidence to suggest that the "typical" personality profile of nursing students has also changed (Kahn, 1980). In addition, personality changes are evident as a result of the educational experience (Schulz, 1965; Stein, 1969a; Psathas and Plapp, 1969), but not consistently. Several studies, however, demonstrated students' need for autonomy and heterosexuality increased while deference and abasement needs decreased, which are consistent with desired outcomes. With few exceptions, no differences in personality traits of students are evident by type of educational program.

Faculty act as role models for students, transmitting their attitudes, values, and behavioral norms formally through their established structure and courses, and informally through individual advising, informal contacts, and social activities. It has been suggested that they are the primary socializing agents for the neophyte professional (Bragg, 1966). The research on faculty in nursing suggests that they do exert a significant influence, but it is far from uniform. Discrepancy in cues and expectations students receive from faculty is related to the degree of professional development achieved (Ondrack, 1975; Glieb, 1977).

From the published research on socialization, the following conclusions can be drawn. First, there has been no unified framework in which to study socialization. The traditional

sociological model advocated in the 1960's has not been empirically supported in nursing. The diversification in approaches used to study socialization has produced little cumulative evidence from which to generalize. It is also evident that the concepts involved in socialization have not been clearly defined nor outcomes for different types of educational programs delineated. The literature suggests that socialization is a multidimensional construct. The interactive effects of the construct, however, have not been well documented. The literature reviewed here, as well as by others (Schwirian, 1984), supports the need for socialization models to be developed and tested in nursing. The framework upon which this research was based provides one unified approach to better understand this process and upon which to build a cumulative body of research.

Second, the evidence suggests that changes towards professional growth do occur in some domains as a result of the educational process. It is difficult to generalize directional changes from the research, however, because most studies were limited by design to one or two schools and were inconsistent in their definitions of the concepts studied. There also is evidence that change does not occur in some domains as a result of the educational process. There is a need to identify more systematically factors that contribute to or inhibit students' professional development.

Third, of 24 change studies reported in the literature, 21 were conducted in baccalaureate degree programs and three in

diploma programs. No studies were conducted in associate degree programs. In view of nursing's desire to differentiate two levels for entry into practice, little is known to date on the effects of associate degree programs on these socialization outcomes. In addition, little is known about the effect of the educational environment itself. Within the different types of programs, there are a number of curriculum frameworks and designs which create different types of socialization environments. There is a need to identify how these frameworks influence outcomes.

Fourth, there have been considerable changes in society, the nursing profession, and nursing education within the last ten years. The majority of the socialization research, however, was conducted over ten years ago. More recent studies do suggest these changes have a positive effect on socialization outcomes. There is a need to update this research in order to provide relevant data upon which nurse educators can plan and implement programs.

Finally, similarities and differences among types of educational programs are evident in the socialization outcomes. The factors contributing to these similarities and differences, however, have not been clearly identified nor examined for their implications for entry into practice.

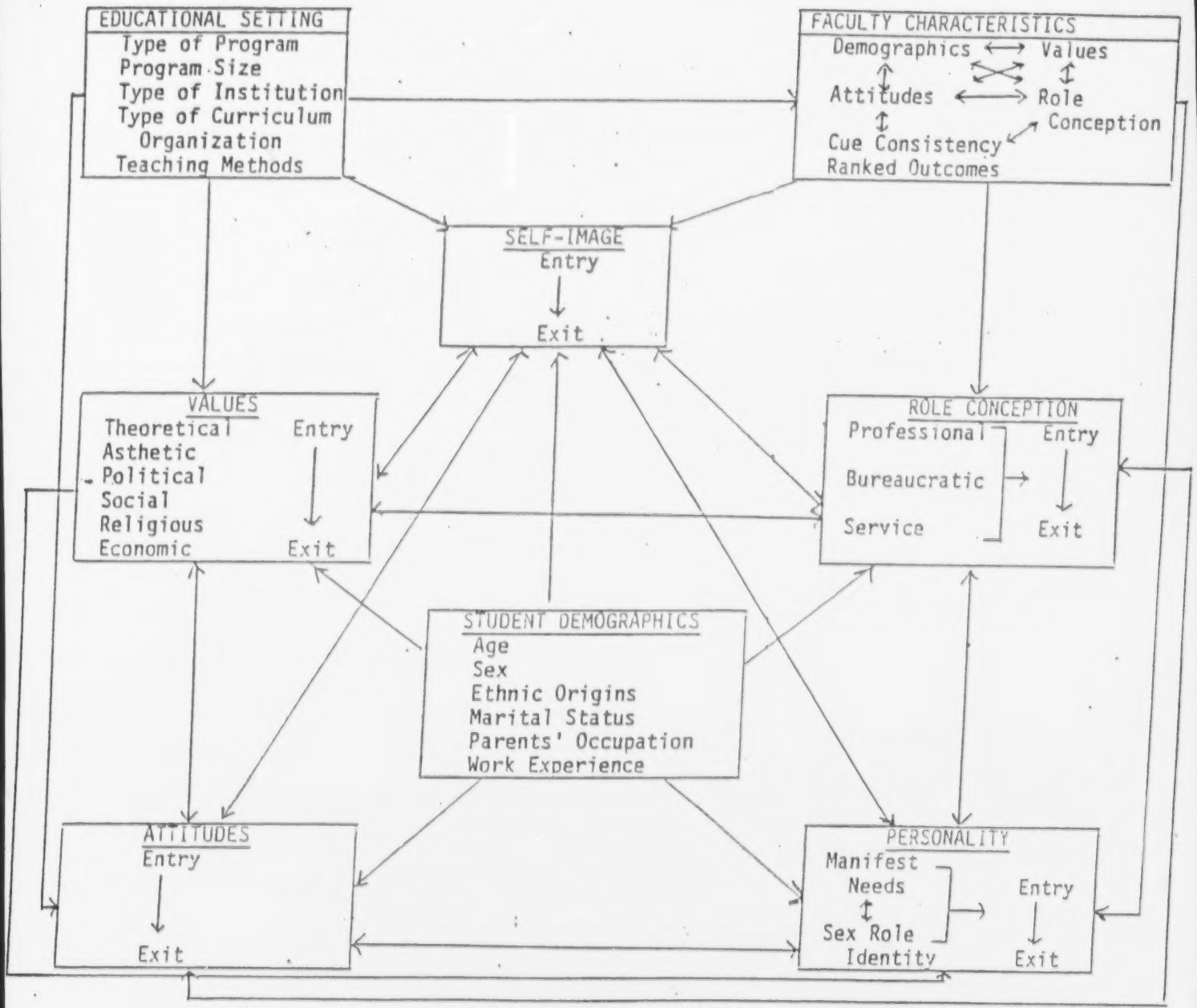

Figure 1. An Explanatory Model of Professional Socialization in Nursing

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